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SUBJECT: SOUTH AFRICA PUBLIC HEALTH OCTOBER 15 ISSUE

Summary

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1. Summary. Every two weeks, USEmbassy Pretoria publishes a public health newsletter highlighting South African health issues based on press reports and studies of South African researchers. Comments and analysis do not necessarily reflect the opinion of the U.S. Government. Topics of this week's newsletter cover: a new survey on youth risk behavior; vaccine research struggles in finding trial participants; criticism by auditor of Health Department for lax funds allocation; lack of vitamins in Africa; results of Western Cape's HIV/AIDS antenatal survey; an outline by the Health finance chief on health funds; the HIV crisis among health workers; and risk behavior in South Africa. End Summary

South African National Youth Risk Behavior Survey Released

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2. The 2002 South African National Youth Risk Behavior Survey, using results from 10,699 students in grades 8-11, highlighted sexual practices of students in South African high schools. The findings include: (1) 40 percent of South African high school pupils are sexually active; (2) more than 14 percent of these students had their first sexual experience before the age of 14, and some of them had already had more than two sexual partners by the age of 14, and (3) in a sampling of 4,182 students, 8.1 percent has had an abortion or had a partner who has had an abortion. Provincially, in KwaZulu-Natal, of 1,151 students sampled, 15.6 percent admitted to having had sex before the age of 14; in Gauteng of the 1,129 sampled, 19.1 percent answered positively; in the Western Cape of the 1,390 sampled, 12.5 percent answered positively. In the Eastern Cape, 12.5 percent of students admitted to having had sex before the age of 14 (1,108 sampled); in the Free State, 18.8 percent of the 1,101 students sampled; in the Limpopo province 11.5 percent of the 964 students sampled; in Mpumalanga 15.7 percent of the 1,220 sampled; in the Northern Cape 10.8 percent of the 1,041 sampled; and in the North West province 9.9 percent of the 1,162 sampled. The survey, which consisted of a sampling of 23 schools per province, was conducted for the purpose of providing nationally and provincially representative data on the prevalence of key risk behaviors, namely: intentional and unintentional injuries, violence and traffic safety, suicide-related behavior, behaviors related to substance abuse, sexual behavior, nutrition and dietary behaviors, physical activity, and hygiene-related behaviors. Source: The Star, October 2.

South Africa: Vaccine Research Struggles to Find Trial Participants

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3. South African HIV vaccine research efforts are being threatened by the low number of people willing to participate in trials, said the Medical Research Council (MRC). According to researchers from the MRC in Durban, the fear of stigma and discrimination from their communities prevented people from taking part in the trials. The country began conducting vaccine trials in November 2003. The stringent eligibility criteria also saw many potential study participants being rejected. Although more than 400 people have attended the MRC's HIV vaccine information sessions in the past two years, only 90 have returned for the screening process - a medical check-up that establishes eligibility. Of these 90, only 18 have been enrolled in Phase I vaccine trials. The MRC has managed to find a further 30 eligible candidates during the past twelve months. Eighteen volunteers is the minimum amount required to proceed with the trials at the Durban site, as the first phase needs a small number of participants. But the vaccine trials could be at risk if the existing participants drop out. The MRC's HIV Vaccine Research Unit, based in Durban and the Perinatal HIV Research Unit at the Chris Hani Baragwanath Hospital in

Soweto, Johannesburg are the only two trial sites. Two more sites are expected to start vaccine testing in the next few months. Despite ongoing education campaigns, misconceptions and myths about the trials and the vaccine present another obstacle. A large number of people believed they could be infected with the HI virus by being inoculated with a test vaccine, researchers said. Such fears were unfounded, "as no live viruses are injected," explained MRC senior clinical research nurse Armstrong Makhofola. The stigma associated with joining an HIV vaccine trial remains a big challenge. In addition, many willing volunteers also do not meet the stringent eligibility criteria, such as belonging to a certain age group, being in good health, having a good level of education, being HIV-negative and at low risk of contracting HIV, as well as not planning a pregnancy in the near future. Phase I trials in Durban and Soweto will end in mid-2005. These results will dictate whether the research can move into its second and third phases. The main objective of Phase I trials is to test the safety of the vaccine prototype. They will also determine its possible side effects. Despite being in the early stages of the first phase of trials, "so far, the [test] vaccine appears to have strengthened immune response," Makhofola said. The candidate-vaccine had also not shown any unexpected side effects so far. The next phase will focus on maintaining the safety level of the vaccine, as well as finding the best dosage and method of administering the vaccine. The third phase involves tens of thousands of participants to assess whether the vaccine pre-vents natural infection from HIV. Source: UN Integrated Regional Information Networks, October 15.

#### Auditor Criticizes Health Department for Lax Funds Allocation

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14. Auditor-General Shauket Fakie has criticized the Health Department for paying out billions of rands in conditional grants to provinces and then failing to follow up on how these funds were spent. Fakie qualified the department's annual report tabled in Parliament yesterday, saying there were fundamental deficiencies, and noncompliance with the law, particularly the Division of Revenue Act. Fakie said the health department did not verify or follow up on all of the payments it made to provincial departments amounting to R7 billion (\$1.1 billion using 6.5 rands per dollar), or 91.4 percent of the department's budget for conditional grants to the provinces. "The act requires funds to be withheld when significant under spending and the no achievement of objectives occurs. It was noted that, in spite of the grants being under spent, transfers were still made. In 18 instances, under spending of conditional grants amounting to R279 million occurred in the provinces on the various programs," he said. On-site monitoring of the Health Professions Training and Development conditional grant of R1.8 billion was inadequate in Gauteng, Free State, Eastern Cape, North West and Limpopo. The Health Department transfers conditional grants to the provinces for combating HIV/AIDS, hospital revitalization, integrated nutrition and hospital management, among other things. Fakie also said the department transferred R110 million to non-governmental organizations and failed to ensure that audited statements for the use of the money were provided, or even that there were effective financial management and control systems in place at the organizations. Source: Business Day, October 18.

#### Africa's Countries Lack Vitamins

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15. It is estimated that vitamin and mineral deficiencies are costing sub-Saharan economies more than \$2.3 billion a year in lost productivity. Iron deficiency alone costs South Africa 0.4% of its gross domestic product. A report released by the World Health Organization, the Macronutrient Initiative, the United Nations Children's Fund, the Global Alliance for Improved Nutrition and the Development Bank of Southern Africa (DBSA) finds that adding essential vitamins and minerals to foods regularly consumed by a significant proportion of the population can cost as little as a few cents per person per year. In South Africa, it is estimated that 37 percent of children under the age of five suffer iron deficiency; 160,000 children are born each year with severe mental impairments; and about 26 percent of women between the ages of 15 and 49 have iron-deficiency anemia. Also, 6,000 children under the age of six die each year because they lack vitamin A. In May 2002 the United Nations General Assembly agreed that the elimination or reduction of vitamin deficiencies should be one of the principal goals of development to be achieved early this century. Almost two years ago South Africa joined a global initiative to fortify flour with iron and folic acid and vitamin A, investing \$11 million a year over the next five years. South Africa iodizes 62 percent of salt sold, hoping to save the lives of 5800 children and prevent 3400 birth defects a year. In South Africa, 33% of children under the age of six have

subclinical vitamin A deficiency. Source: Business Day, October 8.

#### Western Cape's HIV/AIDS Antenatal Survey Results

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16. Western Cape's latest antenatal survey reveals that 13 percent of pregnant women attending public health facilities have HIV (up from 12.4 percent in 2002) and that teenage infection rates have been increasing by 1 percent annually, with 8.5 percent of all pregnant 15-19 year olds having HIV. 52 percent of districts reported HIV prevalence rates of greater or equal to 10 percent. There had been a rapid rate of increase in urban settings, where over 65 percent of the province's populations reside. The HIV prevalence rate in the under 20 age group has continued to rise consistently over the last eight years with the rate highest among younger women. It continues to increase rapidly among 15 to 24 year old women. The district with the highest infection rate is Gugulethu/ Nyanga, where 28 percent of pregnant women are infected. The Western Cape has the lowest HIV prevalence of all provinces and around one-third of that of KwaZulu-Natal. To combat the rise among teenagers, the Health Department is planning peer education programs in every high school this year. Around a quarter already run these programs. The survey showed that: (1) The districts with the highest prevalence were Gugulethu/ Nyanga, with 28 percent prevalence, Khayelitsha (27.2 percent), Helderberg (19 percent), Oostenberg (16 percent), and the Knysna-Plettenberg Bay area (15.6 percent); (2) there were fewer infections in rural (8.3 percent) than in urban (14.7 percent) areas, although infections were high along the N2 between Plettenberg Bay and Cape Town; (3) lowest infection rates were found in the Klein Karoo (5.4 percent), the Central Karoo (6.5 percent), Mitchells Plain (6.3 percent) and Blaauwberg (4.4 percent); (4) the epidemic in the Western Cape is around five years behind the national epidemic; and (5) the HIV infection rate of the total population in the Western Cape is probably half that of pregnant women at around 6.5 percent. The evidence indicates that the largest risk group in our province is the under-20s. Source: Cape Times, October 8; Health E-News, October 7.

#### Health Finance Chief Outlines Action on Health Funds

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17. The Health Department's chief financial officer, Gerrit Muller, conceded that the department had failed to properly oversee the spending of billions of rands given to provinces as conditional grants, but said remedial steps had been taken to address the problem. Muller's comments came after auditor-general Shauket Fakie's damning report on the Health Department's spending, which became public when its annual report was tabled in Parliament (see above article). Muller provided the parliamentary portfolio on health with details of the department's R172 million under spending during the 2003-04 financial year, and said the department's staff complement would be strengthened to improve financial monitoring. Co-ordination with the provinces would also be improved, he said, using forums such as the provincial chief financial officers gathering, the meeting of the health minister and the nine provincial ministers and meetings of the provincial heads of health. Regarding the lack of oversight for nongovernmental organizations (NGOs) that received funding from government, Muller said it was difficult to obtain financial statements from NGOs that received once-off funding. Those requesting more funding had to provide financial statements and audited reports. Source: Business Day, October 13.

#### HIV Crisis Among South Africa's Health Workers

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18. October's issue of South African Medical Journal published an article showing a high prevalence rate of HIV/AIDS of health workers in KwaZulu-Natal, Free State, Mpumalanga, and North West provinces. Out of 595 respondents, an estimated 15.7 percent of health workers in the four provinces had HIV/AIDS in 2002. The authors said the high HIV prevalence among health workers had serious implications including increased absenteeism, and the fact that non-infected workers had to compensate by working much harder, leading to lower morale and burnout. The study used a stratified cluster sample, drawn from 5% of health facilities in the country that represented the public and private health sectors in Free State, Mpumalanga, KwaZulu-Natal and North West. The sample was designed to obtain a representative, nation-wide sample of medical professionals and nonprofessional health workers, with a sub-sample comprising workers in four provinces tested for HIV. Among younger health workers, the HIV prevalence rates were even higher. The group, aged between 18 and 35, had an estimated HIV prevalence rate of 20 percent. About 20.3 percent of nonprofessionals were infected with HIV, while 13.7 percent of professionals were HIV-positive. Black health workers

had a much higher HIV prevalence than other race groups, however caution needed to be exercised in interpreting the results, because the figures among the other race groups were too small to yield meaningful results. Source: Business Day, October 13.

#### South Africa's Risk Behavior -----

19. Results from Durex's eighth annual online global sex survey, in which more than 3,000 South Africans participated, highlighted continuing South African risky sexual behavior.

While 78 percent of South Africans are seriously concerned about HIV-Aids, 58 percent are having unprotected sex with partners whose sexual history they do not know. The survey showed that of the South Africans who completed the questionnaire, 21 percent have never received any formal sex education. The survey is internet-based with 350,000 people participating from 41 countries. Source: SAPA, October 12.

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